

## STATE OF WISCONSIN BOARD ON AGING AND LONG TERM CARE

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## I am a Diabetic, what will happen with my Coverage in my "Medigap" Policy?

On January 1, 2006, Medicare's Prescription Plan begins... Part D. "I am a Diabetic, and my supplemental policy along with Medicare, covers all of my Diabetic supplies including Insulin. I never get a bill. Now, I have a decision to make about my current coverage. If I take Medicare's Prescription Plan I will lose the Diabetic mandate under my supplemental policy...but if I don't take Part D, I run the risk of paying a higher monthly premium because of a 1% penalty per month. Oh what shall I do?????"

This is a common question that many beneficiaries who are Diabetic and who have a Medicare Supplement Policy have about their coverage. Medicare Supplement policies issued in the State of Wisconsin after 1-1-1985 include a mandatory provision covering all diabetic supplies. These policies provide coverage for usual and customary charges for supplies and Insulin for the treatment of Diabetes. Medicare Part B covers a glucometer, lancets and test strips, with the supplemental policy covering the difference (the Part B deductible is applied).

As part of the Medicare Modernization Act (MMA), Medicare's Prescription plan (Part D) <u>will now provide coverage</u> for prescribed insulin and the supplies for injection of insulin including syringes, needles, alcohol swabs, and gauze. Test strips and lancets will continue to be covered under Medicare Part B. Medicare Supplemental policies purchased on or after January 1, 2006 will no longer include the Diabetic Mandate. If a person enrolls into a Part D plan, they will also lose the Diabetic Mandate that is in their current policies that were issued before January 1, 2006.

Not enrolling into a Part D plan may save the diabetic mandate in supplemental policies purchased prior to January 1, 2006, however, unless that policy has comprehensive coverage for drugs or the beneficiary has other "comparable drug coverage" (ie: SeniorCare, Veterans/Tricare, or some Retiree/Employer plans) the beneficiary will run the risk of incurring a 1% penalty for each month they delay enrolling into a Part D plan. Remember, the end of the initial enrollment period for Medicare's Prescription Plan is May 15<sup>th</sup>, 2006.

Contact the Medigap Helpline at (800) 242-1060 if you have questions about the Diabetic Mandate in your policy as compared to Part D coverage. If you are age 60 and over and need help in finding a Part D Plan, contact your County Benefit Specialist or the Prescription Drug Helpline at (866) 456-8211. If you are under age 60 and disabled, contact the Disability Drug Benefit Helpline at (800) 926-4862.

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